

IN THE COURT OF APPEALS OF OHIO
SEVENTH APPELLATE DISTRICT
_____ COUNTY

_____))
_____)) Case No. _____
_____))
Plaintiff(s)-Appell____(s))
VS.) **MOTION TO EXTEND THE**
_____)) **TIME TO FILE (Record,**
_____)) **Transcript, or Brief)**
_____))
Defendant(s)-Appell____(s).)

Appellant/Appellee, _____, requests an extension of time to file the (record, transcript, or brief) until _____. An extension of time is necessary because (please provide the reasons you need an extension of time).

Respectfully submitted,

Signature

Attorney for Appellant/Appellee or
Appellant's/Appellee's Name, Pro-se

Attorney's Ohio Registration Number

Address

Telephone & Fax Number & Email Address

CERTIFICATE OF SERVICE

I hereby certify that a copy of this Motion to Extend Time was served by regular mail upon _____ on _____, 20 ____.

Signature of Attorney/Pro-se